



## Accident/incident report form INSPiRE Sport

Name of person in charge of session/competition

Site where incident/accident took place

Date of incident/accident

Name of injured person

Address of injured person

Nature of incident/injury and extent of injury

**Give details of how and precisely where the incident took place.**

Describe what activity was taking place, for example training/game/getting changed.

**Give full details of action taken during any first aid treatment and the name(s) of first-aider(s).**

**Were any of the following contacted?**



Parents/carers

Yes

No



Police

Yes

No



Ambulance

Yes

No

**What happened to the injured person following the incident/accident?**

E.g., carried on with session, went home, went to hospital etc.

**All of the above facts are a true record of the accident/incident**

**Signed:**

**Date:**

**Name:**

*In the event of an accident occurring through insufficient training or faulty equipment/facilities, follow up action to include completion of risk assessment form (Template 8).*